



Permit # _____

BUILDING PERMIT APPLICATION
Schedule inspection by 3:00 P.M. day prior
(303) 621-3140

Permit Fee _____

Property Owner _____ Phone _____ Date _____

Mailing Address _____
Street / PO Box _____ City _____ State _____ Zip _____

Address of Property _____

Subdivision _____ Intended Use _____

Contractor _____ Contractor # _____ Contractor Phone # _____

IMPROVEMENT SURVEY WILL BE DUE BEFORE ANY INSPECTIONS ARE COMPLETED FOR NEW RES AND ADDITIONS ON LESS THAN 60 ACRES

Parcel ID _____ #Acres _____ Zoned _____

Section _____ Township _____ Range _____

Structural Setback Minimums: F _____ S _____ R _____

Sq Ft: DWLF 1st flr _____ Sq Ft: DWLF 2nd flr _____ Sq Ft: GARF _____

Sq Ft: BSMU _____ Sq Ft: BSMF _____

Sq Ft DECK _____ Sq Ft CDEK _____

Group _____ Division _____ Type _____

Special Notes: _____

This permit includes plumbing & mechanical. Septic & driveway permits are issued separately.

Water well permits issued by **State Water Resources (303) 866-3587**

This application, when executed by the ELBERT COUNTY BUILDING INSPECTOR, and when an executed copy is furnished to the applicant, IS A BUILDING PERMIT.

Electrical permits issued by **State of Colorado (303) 894-2300****TO SCHEDULE ELECTRICAL INSPECTIONS CALL (303) 621-2241**This permit is **void** unless work actually begins within **180 DAYS** of issuance or if work is suspended or abandoned for a period of **180 DAYS**.

Date Approved : Month _____ Day _____ Year _____

Expiration Date: Month _____ Day _____ Year _____

Six Month Extension: \$100.00 Date Paid _____

Expiration Date: Month _____ Day _____ Year _____

INSPECTION RECORD

*** Improvement Survey Due Now ***

SAN O LET MUST BE ON SITE

Caissons: ENGINEER REPORT REQUIRED

Footers: Size _____

Steel: _____

Foundation: _____

Steel: _____

Ground Plumbing: _____

License # _____

Rough Frame/Plumb/Heat: _____

Pressure Test: _____

Yard Line Pressure: _____

Rough Elec Appv: _____

Insulation Certificate: _____

Drywall: _____

Well Permit #: _____

Final Electric: _____

Final Driveway: _____

Septic Appv: _____

Final Frame/Plumb/Heat: _____

Certificate of Occupancy: _____

Fire Dept Appv: _____

Health Dept Appv: _____

Zoning Appv: _____

X

ELBERT COUNTY BUILDING INSPECTOR

APPLICANT SIGNATURE

BP _____ PR _____ ST _____ FD _____

Revised 05/10/2004

PERMIT # _____

TO: APPLICANTS FOR BUILDING PERMITS
RE: COMPLIANCE WITH PROTECTIVE COVENANTS

AS PART OF YOUR APPLICATION FOR A BUILDING PERMIT IN ELBERT COUNTY, YOU ARE REQUESTED TO CONTACT THE ARCHITECTURAL CONTROL COMMITTEE OR HOMEOWNERS ASSOCIATION, IN YOUR NEIGHBORHOOD AND OBTAIN THEIR APPROVAL OF YOUR PLANS PRIOR TO A BUILDING PERMIT BEING ISSUED. BY SIGNING BELOW, YOU ARE REPRESENTING TO THE COUNTY BUILDING DEPARTMENT THAT TO THE EXTENT THAT SUCH A ENTITY EXISTS, YOU HAVE MADE CONTACT FOR THE REVIEW AND APPROVAL OF YOUR PLANS. PLEASE BE ADVISED THAT THE COUNTY DOES NOT ENFORCE PROTECTIVE COVENANTS OR POLICE VIOLATIONS OF SUCH COVENANTS. YOU ARE RESPONSIBLE FOR THE NECESSARY COMPLIANCE WITH COVENANCE APPLICABLE TO YOUR PROJECT.

BILL TANNER
ELBERT COUNTY BUILDING OFFICIAL

APPLICANTS SIGNATURE

DATE

APPLICANTS PRINTED NAME_____

**APPLICANT CHECK LIST
FOR
ADDITIONS TO A RESIDENCE**

SCHEDULE INSPECTIONS BY 3:00PM FOR NEXT DAY 303-621-3140

_____ PLANNING AND ZONING SIGNOFF SHEET (WITH SIGNATURES)

_____ STRUCTURAL DESIGN BY ARCHITECT OR ENGINEER (*Wet Stamped*) **

_____ 2 SETS OF BLUE PRINTS CONSISTING OF THE FOLLOWING:

- ◆ Floor plan **for all floors & basement**, (room sizes and use, window & door location & sizes, plumbing, attic access, location of furnace and water heater/boiler as applicable).
- ◆ Elevations ALL sides
- ◆ Section of construction including stairs, ceiling height, fireplace, masonry, floor joist layout and span, roof rafter/truss design and any special items.
- ◆ Heating type and location of the furnace and water heater, boiler whatever is applicable.
- ◆ Total square footage of all levels
- ◆ scale (example 1/4 inch = 1 foot)

_____ ONE ENGINEERED FOUNDATION DESIGN (**Wet Stamped**) CONSISTING OF:

- ◆ Size of footings and steel if required.
- ◆ size of wall and steel if required
- ◆ Caisson size and depth and steel if required
- ◆ Beams: type and size
- ◆ Sectional

_____ ONE SOILS TEST BY A CO. LICENSED ENGINEER **STAMPED AND SIGNED.**

_____ PERCOLATION TEST (*IF ADDING ON TO, OR DOING A NEW FIELD*)

_____ NAME OF SEPTIC INSTALLER AND THEIR ELBERT COUNTY CONTRACTOR #

****For load bearing beams, floor system, headers and columns, design of balloon walls, deck joists, beam posts, piers and attachments**

*****SEPARATE STATE ELECTRICAL PERMIT REQUIRED*****

ONCE A BUILDING PERMIT HAS BEEN ISSUED ALL INSPECTION INFORMATION, CORRESPONDENCE BY MAIL, FAX, OR TELEPHONE MUST BE REFERENCED BY YOUR PERMIT NUMBER OR IT WILL NOT BE ACCEPTED OR PROCESSED.

PLEASE NOTE IF ANY NEW BEDROOMS ARE BEING ADDED YOU MAY HAVE TO UPGRADE/SIZE YOUR SEPTIC SYSTEM.